



# EVALUATION - VIOLATION - ENFORCEMENT FORM

HANDLER										Date Submitted																				
ID Number	W	V	D	0	1	5	1	4	8	9	2	7	Ldr	[ ]	Tsf	[ ]	INC	[ ]	LOG	[ ]	SQG	[X]	TRA	[ ]	0	4	1	3	9	2
Handler Name																														

EIMCO Mining Machinery, Incorporated

Street

US Route 52 N

City

Bluefield, WV

EVALUATION										Add	[X]	Change	[ ]	Delete	[ ]									
Date	0	4	0	9	9	2	Number	[ ]	[ ]	Agency	S	Type	C	E	I	Reason	[ ]	Branch	C	M	Person	J	R	F

Areas of Evaluation (E - Evaluated, NE - Not Evaluated, NA - Not Applicable)

GOR	[ ]	TGR	[ ]	DCH	[ ]	DGW	[ ]	DHC	[ ]	DPP	[ ]	CAS	[ ]	
GPT	[ ]	THR	[ ]	DCL	[ ]	DIN	[ ]	DHR	[ ]	DSI	[ ]	FEA	[ ]	
GGR	[ ]	GRR	[ ]	TOR	[ ]	DCP	[ ]	DLB	[ ]	DOR	[ ]	DTR	[ ]	
GLB	E	V	GSC	[ ]	DFR	[ ]	DLF	[ ]	DTT	[ ]	[ ]	[ ]	[ ]	
GHR	[ ]	GSO	E	V	TWD	[ ]	DGS	[ ]	DLT	[ ]	DPB	[ ]	DWP	[ ]

No violations

Comments

VIOLATION										Add	[ ]	Change	[ ]	Delete	[ ]
Agency	[ ]	Number	[ ]	Area	[ ]	Class	[ ]	Regulation Type	[ ]	Regulation Citation					
Date Determined	[ ]	Priority	[ ]	Branch	[ ]	Person	[ ]	Returned to Compliance Scheduled	[ ]	Actual	[ ]	[ ]	[ ]		

Comments

VIOLATION										Add	[ ]	Change	[ ]	Delete	[ ]
Agency	[ ]	Number	[ ]	Area	[ ]	Class	[ ]	Regulation Type	[ ]	Regulation Citation					
Date Determined	[ ]	Priority	[ ]	Branch	[ ]	Person	[ ]	Returned to Compliance Scheduled	[ ]	Actual	[ ]	[ ]	[ ]		

Comments

VIOLATION										Add	[ ]	Change	[ ]	Delete	[ ]
Agency	[ ]	Number	[ ]	Area	[ ]	Class	[ ]	Regulation Type	[ ]	Regulation Citation					
Date Determined	[ ]	Priority	[ ]	Branch	[ ]	Person	[ ]	Returned to Compliance Scheduled	[ ]	Actual	[ ]	[ ]	[ ]		

Comments

VIOLATION										Add	[ ]	Change	[ ]	Delete	[ ]
Agency	[ ]	Number	[ ]	Area	[ ]	Class	[ ]	Regulation Type	[ ]	Regulation Citation					
Date Determined	[ ]	Priority	[ ]	Branch	[ ]	Person	[ ]	Returned to Compliance Scheduled	[ ]	Actual	[ ]	[ ]	[ ]		

Comments

# EVALUATION - VIOLATION - ENFORCEMENT FORM

ID Number	Handler Name
W V D 0 1 5 1 4 8 9 2 7	EIMCO Mining Machinery, Incorporated

VIOLATION		Add	Change	Delete
Agency	Number	Area	Class	Regulation Type
<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Date Determined		Priority	Branch	Person
<input type="text"/>		<input type="text"/>	<input type="text"/>	<input type="text"/>
				Returned to Compliance Scheduled <input type="text"/> Actual <input type="text"/>

Comments

VIOLATION		Add	Change	Delete
Agency	Number	Area	Class	Regulation Type
<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Date Determined		Priority	Branch	Person
<input type="text"/>		<input type="text"/>	<input type="text"/>	<input type="text"/>
				Returned to Compliance Scheduled <input type="text"/> Actual <input type="text"/>

Comments

VIOLATION		Add	Change	Delete
Agency	Number	Area	Class	Regulation Type
<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Date Determined		Priority	Branch	Person
<input type="text"/>		<input type="text"/>	<input type="text"/>	<input type="text"/>
				Returned to Compliance Scheduled <input type="text"/> Actual <input type="text"/>

Comments

ENFORCEMENT		Add	Change	Delete
Date	Number	Agency	Type	Branch
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Penalty Assessed		Settled		
<input type="text"/>		<input type="text"/>		

## COVERED VIOLATIONS

Agency	Number	Area	Agency	Number	Area	Agency	Number	Area
<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>
<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>
<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>
<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>
<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>
<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>
<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>
<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>

## PENALTY PAYMENTS

Date	Amount	Date	Amount
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Comments



STATE OF WEST VIRGINIA  
DEPARTMENT OF COMMERCE, LABOR AND ENVIRONMENTAL RESOURCES  
WASTE MANAGEMENT SECTION

1356 Hansford Street  
Charleston, West Virginia 25301  
Telephone (304)348-5929

April 21, 1992

GASTON CAPERTON  
Governor

J. EDWARD HAMRICK III  
Director

ANN A. SPANER  
Deputy Director

David Pyles  
EIMCO Mining Machinery Inc.  
P.O. Box 1100  
Bluefield, West Virginia 24701

Dear Mr. Pyles:

Enclosed is a copy of the **Compliance Evaluation Inspection (CEI) Report** completed on your facility by a representative of the Chief of the Waste Management Section. This report is based on the inspection conducted on April 9, 1992.

There were no areas of non-compliance with the appropriate Hazardous Waste Management Regulations documented during this inspection.

Thank you for your assistance and cooperation during this inspection. If you have any questions concerning the inspection or attached report, please feel free to contact this office at (304) 348-5989.

Sincerely,

A handwritten signature in dark ink, appearing to read "H. Michael Dorsey".

H. Michael Dorsey  
Assistant Chief  
Compliance Monitoring/Enforcement

HMD/kw

Enclosure

cc: Janemarie Frieheiler, U.S. EPA, Region III  
John Fredericks, Inspector  
File

INSPECTION FACT SHEET

COMPANY NAME: EIMCO MINING MACHINERY INC. ID#: WVD015148927

MAILING ADDRESS: P.O. BOX 1100 FACILITY TYPE: SQG  
BLUEFIELD, WV 24701

LOCATION: U.S. ROUTE 52 NORTH COUNTY: MERCER  
Brush Fork, WV

COMPANY CONTACT: DAVID PYLES HANDLING CODES:  
MAX HUDSON

PHONE: (304) 327-6623

PURPOSE: Compliance Evaluation Inspection

APPLICABLE REGULATIONS: West Virginia Hazardous Waste Management  
Act, Chapter 20 - 5E and 40 CFR, Parts 260-265.

LIST OF CHEMICALS:

[For Small Quantity Generators, list amount of waste, how it is  
handled and where it goes.]

D001/D018/D039 - PARTS CLEANER WASTE - 670 LBS/MONTH - SAFETY-KLEEN

FOO3/F005/D001/D006/D007/D008 - PAINT/THINNER WASTE - 14 LBS/MONTH  
-SAFETY-KLEEN

DATE INSPECTED: APRIL 9, 1992

VIOLATIONS\_\_\_\_\_

NO VIOLATIONS\_\_X\_\_

INSPECTORS: (1) John R. Fredericks

(2) Tom Fisher

(3)

DATE PREPARED: April 13, 1992

PREPARED BY: John R. Fredericks

## INSPECTION REPORT

An unannounced Compliance Evaluation Inspection was performed by John R. Fredericks and Tom Fisher at EIMCO Coal Machinery at 3:00 pm on April 9, 1992. Credentials were presented to Max Hudson, maintenance supervisor, and the purpose of the inspection was explained. The inspectors were later joined by Mr. Dave Pyles, manufacturing services manager, while touring the facility.

This facility primarily manufactures tools and machinery for the coal industry. Waste products are generated in six parts cleaners and a single gun and equipment cleaner all of which are serviced by Safety-Kleen.

Potentially hazardous materials could be generated from paint overspray at the cascade waterfall trough and from ash. When this material needs to be disposed of it should be tested for hazardous waste characteristics.

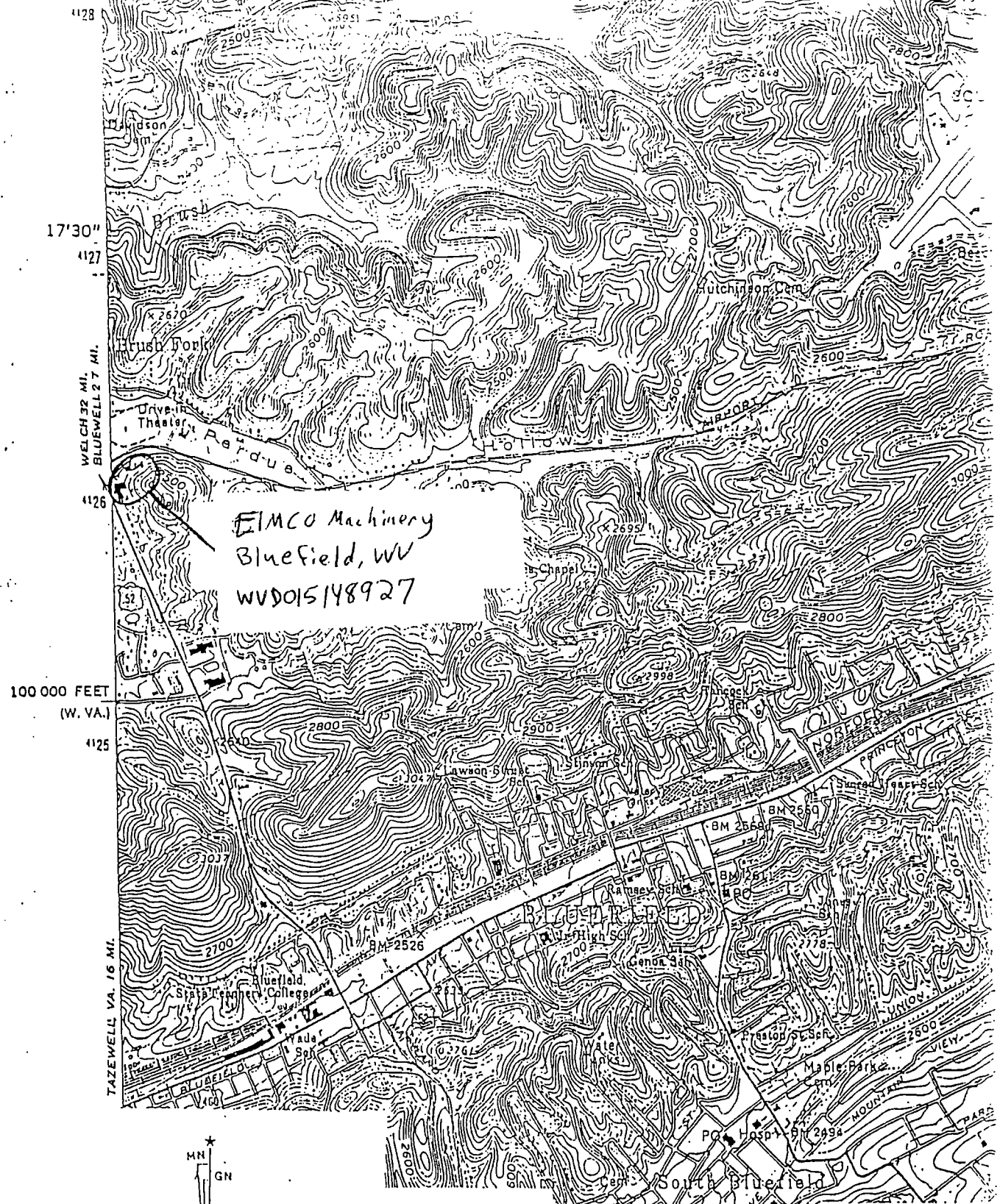
### AREA OF CONCERN

Some oil spillage was evident on the ground near an above ground tank which does not have any secondary containment. Runoff from this area would contain petroleum products. The inspection team was told that plans were underway to provide secondary containment for this tank.

Another small area, approximately 25 X 10, along the back fence opposite the guard shack appeared to have been saturated with oil, which probably leaked from equipment stored in this area. The ground did not appear to be saturated to any significant depth and the area could likely be cleaned up in a few hours by one or two men with shovels.

#### VIOLATIONS

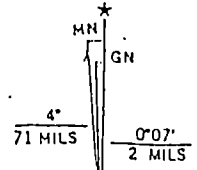
There were no violations of WV State Hazardous Waste Regulations observed during this inspection.



100 000 FEET  
(W. VA.)

WELCH 32 MI.  
BLUEWELL 27 MI.

TAEWELL VA. 16 MI.



UTM GRID AND 1979 MAGNETIC NORTH  
DECLINATION AT CENTER OF SHEET

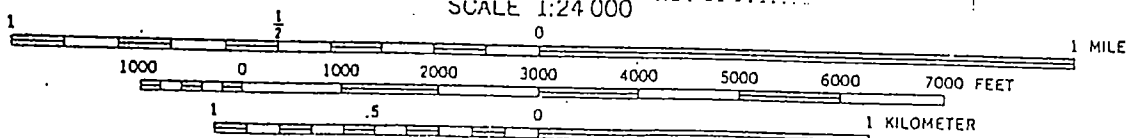
SCALE 1:24 000



QUADRANGLE LOCATION

# ROAD CLASSIFICATION

- Heavy-duty \_\_\_\_\_
- Medium-duty \_\_\_\_\_
- Light-duty \_\_\_\_\_
- Unimproved dirt \_\_\_\_\_
- U. S. Route
- State Route
- Interstate Route



BLUEFIELD, W. VA.—V  
SW/4 BLUEFIELD 15' QUADRANGLE  
N3715—W8107.5/7.5



FY 1990 HAZARDOUS WASTE COMPLIANCE MONITORING AND ENFORCEMENT LOG

1. EPA ID: WV10115114181912171

4. Data Entry

2. HANDLER NAME: EIMCO Mining Machinery, Incorporated

New ☒ XX

3. ADDRESS: P.O. Box 1100 Bluefield, WV 24701

Update ☐ 1

4. DATE OF INITIAL EVALUATION WHICH IS THE BASIS FOR THIS REPORT:

4/4/91

5a. AGENCY RESPONSIBLE FOR EVALUATION:  
Put code in box

S

E = EPA  
S = State  
C = Contractor/EPA

O = Other  
B = Contractor/State  
X = Oversight

6. TYPE OF EVALUATION COVERED BY THIS REPORT:

SELECT EVALUATION Type and insert in box:

1

1 = Compliance Eval. Inspection(CEI) 4 = Comp GWM Eval(CME)  
2 = Sampling Inspection 5 = Compliance Sched. Eval  
3 = Record Review 11 = Case Dev. Inspection  
12 = O&M Inspection

7. DATE OF EVALUATION COVERED BY THIS REPORT (enter only if different from 5):   /  /  

8a. Eval. Comments:  

9. CLASS and VIOLATIONS

Key

'X'=Violations, no Specialties  
'B'=Violations & Specialty  
'S'=Same Viol./Specialty  
'Z'=Pending Determination  
'O'=No Viol or Specialty found

'I' = No insurance only  
'C' = CA Schedule Violation  
'H' = HPV

\* = Class I only

Class of Violation	GWM	C/PC	Fin.Res	Pt. B	Compl.Sch	Manifest	Land-Ban	Other
I						O	O	O
II						X	O	X
Acceptable Codes								
	X	X	X	X	X	X	X	X
	S	S	S	S	S	S	S	S
	Z	Z	Z	Z	Z	Z	Z	Z
	O	O	O	O	O	O	O	O
	H	H	I*	H	C	H	H	H
			B*		B			
			H		H			

3a. Viol Comment:  

2. ENFORCEMENT ACTIONS:

Class	Area of Viol./rel.	Type (use code)	Date Action Taken	Compliance Dates Scheduled	Actual	Penalty Assessed	Collected	Resp. Agency (use code)
II	10.1.2OT	03 8210	4-5-91	5-6-91				S
II	4.1.1MA	03 8210	4-5-91	5-6-91				S
II	10.2.13	03 8210	4-5-91	5-6-91				S
II	10.2.13	03 & 10	4-5-91	5-6-91				S

Codes for  
Types of  
Enforcement  
Actions:

03 = Warning Letter  
04 = Admin. Complaint  
05 = Final Admin. Order  
10 = Informal

11 = Filed Civil Action  
12 = Filed Criminal Action  
18 = Civil Referral to AG/DOJ  
19 = Final Judicial Order

15 = CA Init. Admin Order  
16 = CA Final Admin Order  
21 = Notice of Non-Comp  
22 = FFCA  
23 = Fed. Rec. Referral to HQ

Resp Agency Codes  
E = EPA  
S = State  
X = EPA Oversight

10. Enforc. Comment:  

12 NOV



# HAZARDOUS WASTE DATA MANAGEMENT SYSTEM MAINTENANCE FORM FOR NOTIFICATION

EPA-ID # WV001L15L148922

Date: 8/2/89

FACILITY NAME

Baker Mining Service

New Facility Name

Emco Mining Machinery Inc.

Contact Person/Position

Lancaster Floyd

QAM

(Last

First, M)

Title

Tel No

MAILING  
ADDRESS

Street

City

State

Zip

LOCATION  
ADDRESS

Street

City

State

Zip

County Name

County Code

Owner Name

Kriph Hughes Inc

Operator Name

Activity Code

--- Gen --- Tr --- Tsd  
--- 5. Market or Burn HWF  
--- A. Gen Mark to Burn  
--- B. Other Marketer  
--- C. Burner

Used Oil Fuel Activities

--- 6. Off-Spec Used Oil Fuel  
--- A. Gen Mark to Burn  
--- B. Other Marketer  
--- C. Burner  
--- 7. Spec Used Oil Fuel Mark

Waste Fuel Burning: Type of Combustion Device

--- Utility Boiler --- Ind. Boiler --- Ind. Furnace

Mode of Transportation (Transporters Only)

--- Air --- Rail --- Highway --- Water --- Other

Maintenance Screens

W1 Card

Existing  
Waste  
Code

New  
Waste  
Code

F2 Card

Non-Reg Ind. (c303)

-----  
-----  
-----

-----  
-----  
-----

D001  
E003  
-----

-----  
-----  
-----

Esther

This was Baker Mine  
Service.

The Name and Contact  
have changed

Mike



**RECEIVED  
GENERAL STATE SECTION**

**AUG 01 1989**

**ID - For Official Use Only**

C																		T/A	C
W																			1

**X. Description of Hazardous Wastes (continued from front)**

**A. Hazardous Wastes from Nonspecific Sources.** Enter the four-digit number from 40 CFR Part 261.31 for each listed hazardous waste from nonspecific sources your installation handles. Use additional sheets if necessary.

1	2	3	4	5	6
0001	F003				
7	8	9	10	11	12

**B. Hazardous Wastes from Specific Sources.** Enter the four-digit number from 40 CFR Part 261.32 for each listed hazardous waste from specific sources your installation handles. Use additional sheets if necessary.

13	14	15	16	17	18
19	20	21	22	23	24
25	26	27	28	29	30

**C. Commercial Chemical Product Hazardous Wastes.** Enter the four-digit number 40 CFR Part 261.33 for each chemical substance your installation handles which may be hazardous waste. Use additional sheets if necessary.

31	32	33	34	35	36
37	38	39	40	41	42
43	44	45	46	47	48

**D. Listed Infectious Wastes.** Enter the four-digit number 40 CFR Part 261.34 for each hazardous waste from hospitals, veterinary hospitals, or medical and research laboratories your installation handles. Use additional sheets if necessary.

49	50	51	52	53	54

**E. Characteristics of Nonlisted Hazardous Wastes.** Mark 'X' in the boxes corresponding to the characteristics of nonlisted hazardous wastes your installation handles. (See 40 CFR Parts 261.21 - 261.24)

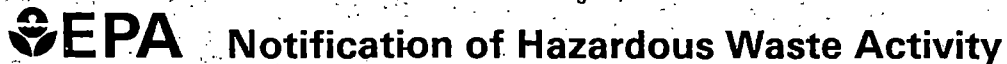
☒ 1. Ignitable (D001)    
 ☐ 2. Corrosive (D002)    
 ☐ 3. Reactive (D003)    
 ☐ 4. Toxic (D000)

**XI. Certification**

**I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.**

Signature <i>Floyd E. Lancaster</i>	Name and Official Title (type or print) <i>Quality Assurance Manager</i>	Date Signed <i>7-11-89</i>
--	---	-------------------------------

**Estimated burden: Public reporting burden for this collection of information is estimated to be 3 hours, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460; and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503.**



Please refer to the *Instructions for Filing Notification* before completing this form. The information requested here is required by law (*Section 3010 of the Resource Conservation and Recovery Act*).

### Comments

[illegible]

Installation's EPA ID Number										Approved		Date Received (yr. mo. day)				
C	W	V	D	0	1	5	4	8	9	2	T/A	C				
F													88	04	12	055 Merced

[illegible]

**Street or P.O. Box**

[illegible]

City or Town															State		ZIP Code						
C 4	B	L	U	E	F	I	E	L	D								W	Y	2	4	7	0	1

**Street or Route Number**

[illegible]

City or Town															State		ZIP Code							
5	B	L	U	E	F	I	E	L	D									W	V	2	4	7	0	1

## Name and Title (last, first, and job title)

BRITZ	ALBERT	MGRMFG	3043250481
-------	--------	--------	------------

## A. Name of Installation's Legal Owner:

C	B	A	K	E	R		H	U	G	H	S		I	N	C						P
---	---	---	---	---	---	--	---	---	---	---	---	--	---	---	---	--	--	--	--	--	---

### A. Hazardous Waste Activity

☒ 1a. Generator ☒ 1b. Less than 1,000 kg/mo.

☐ 2. Transporter

☐ 3. Treater/Storer/Disposer

☐ 4. Underground Injection

☐ 5. Market or Burn Hazardous Waste Fuel  
(enter 'X' and mark appropriate boxes below)

☐ a. Generator Marketing to Burner

☐ b. Other Marketer

☐ c. Burner

### B. Used Oil Fuel Activities

☐ 6. Off-Specification Used Oil Fuel  
(enter 'X' and mark appropriate boxes below)

☐ a. Generator Marketing to Burner

☐ b. Other Marketer

☐ c. Burner

☐ 7. Specification Used Oil Fuel Marketer (or On site Burner)  
Who First Claims the Oil Meets the Specification

☐ A. Utility Boiler☐ A. Utility Boiler      ☐ B. Industrial Boiler      ☐ C. Industrial Furnace☐ A. Air    ☐ B. Rail    ☐ C. Highway    ☐ D. Water    ☐ E. Other (specify) \_\_\_\_\_IX. First or Subsequent Notification

Mark 'X' in the appropriate box to indicate whether this is your installation's first notification of hazardous waste activity or a subsequent notification. If this is not your first notification, enter your installation's EPA ID Number in the space provided below.

☒ A. First Notification      ☐ B. Subsequent Notification (complete item C)

ID — For Official Use Only																
C															T/A	C
W																1

# X. Description of Hazardous Wastes (continued from front)

**A. Hazardous Wastes from Nonspecific Sources.** Enter the four-digit number from 40 CFR Part 261.31 for each listed hazardous waste from nonspecific sources your installation handles. Use additional sheets if necessary.

1 F 0 0 2	2 F 0 0 4	3	4	5	6
7	8	9	10	11	12

**B. Hazardous Wastes from Specific Sources.** Enter the four-digit number from 40 CFR Part 261.32 for each listed hazardous waste from specific sources your installation handles. Use additional sheets if necessary.

13	14	15	16	17	18
19	20	21	22	23	24
25	26	27	28	29	30

**C. Commercial Chemical Product Hazardous Wastes.** Enter the four-digit number from 40 CFR Part 261.33 for each chemical substance your installation handles which may be a hazardous waste. Use additional sheets if necessary.

31	32	33	34	35	36
37	38	39	40	41	42
43	44	45	46	47	48

**D. Listed Infectious Wastes.** Enter the four-digit number from 40 CFR Part 261.34 for each hazardous waste from hospitals, veterinary hospitals, or medical and research laboratories your installation handles. Use additional sheets if necessary.


49	50	51	52	53	54
----	----	----	----	----	----

**E. Characteristics of Nonlisted Hazardous Wastes.** Mark 'X' in the boxes corresponding to the characteristics of nonlisted hazardous wastes your installation handles. (See 40 CFR Parts 261.21 — 261.24)

☒ 1. Ignitable (D001)
 ☐ 2. Corrosive (D002)
 ☐ 3. Reactive (D003)
 ☐ 4. Toxic (D000)

# XI. Certification

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

Signature 	Name and Official Title (type or print) Albert Bantz Mgr MC	Date Signed 4/4/88
--	--	-----------------------

EPA Form 8700-12 (Rev. 11-85) Reverse

RECEIVED

APR 06 1988

DEPARTMENT OF NATURAL RESOURCES  
DIVISION OF WASTE MANAGEMENT



WVD 15148927

596

STATE OF WEST VIRGINIA  
DEPARTMENT OF COMMERCE, LABOR AND ENVIRONMENTAL RESOURCES  
WASTE MANAGEMENT SECTION

1356 Hansford Street  
Charleston, West Virginia 25301  
Telephone (304)348-5929

April 15, 1991

GASTON CAPERTON  
Governor

J. EDWARD HAMRICK III  
Director

ANN A. SPANER  
Deputy Director

CERTIFIED MAIL  
RETURN RECEIPT REQUESTED

Joseph Cettin, General Manager  
EIMCO Mining Machinery, Inc.  
P.O. Box 1100  
Bluefield, West Virginia 24701

Dear Mr. Cettin:

Enclosed is a copy of the **Compliance Evaluation Inspection (CEI) Report** completed on your facility by representatives of the Chief of the Waste Management Section. This report is based on the inspection conducted on April 4, 1991.

Accompanying this report you will find a **Notice of Violation (NOV)** for those violations detected during the course of this inspection. The Enforcement Office of this Section and the United States Environmental Protection Agency have been notified so that these violations have become a permanent addition to the compliance history of this facility.

Thank you for your assistance and cooperation during this inspection. If you have any questions concerning the inspection or the attached report, please feel free to contact this office at (304) 348-5989.

Sincerely,

H. Michael Dorsey, Assistant Chief  
Compliance Monitoring/Enforcement

HMD/kw

Enclosures

cc: Janemarie Newton, U.S. EPA Region III  
Civil and Administrative Enforcement Unit  
P. L. Brown, Inspector  
File



INSPECTION FACT SHEET

COMPANY NAME: EIMCO Mining Machinery, Inc. I.D. #: WVD015148927

MAILING ADDRESS: P.O. Box 1100 TYPE OF FACILITY: SQG  
Bluefield, WV 24701

LOCATION: US Route 52 North COUNTY: Mercer (055)  
Bluefield, WV

COMPANY CONTACT: Joseph Cettin, general mgr. HANDLING CODES:  
Cliff Lively, emergency coordinator  
& RCRA contact

PHONE: (304) 327-6623

PURPOSE: Compliance Evaluation Inspection (C.E.I.)

APPLICABLE REGULATIONS: West Virginia Hazardous Waste Management Act,  
Chapter 20-5E and 40 CFR, Part 260-265

LIST OF CHEMICALS:

(For Small Quantity Generators, list amount of waste, how it is handled; where it goes)

F003/F005/D006/D007/D008 - waste paint/thinner - 27 lbs/8 weeks - Safety Kleen  
D001 - parts cleaner waste - 1724 lbs/6 weeks - Safety Kleen  
Water-based coolant (non-hazardous) - Safety Kleen  
Oil-based coolant (non-hazardous) - Safety Kleen  
Waste oil - Safety Kleen

DATE INSPECTED: 4-4-91

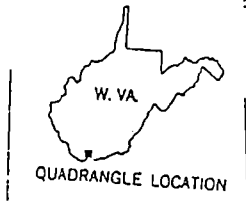
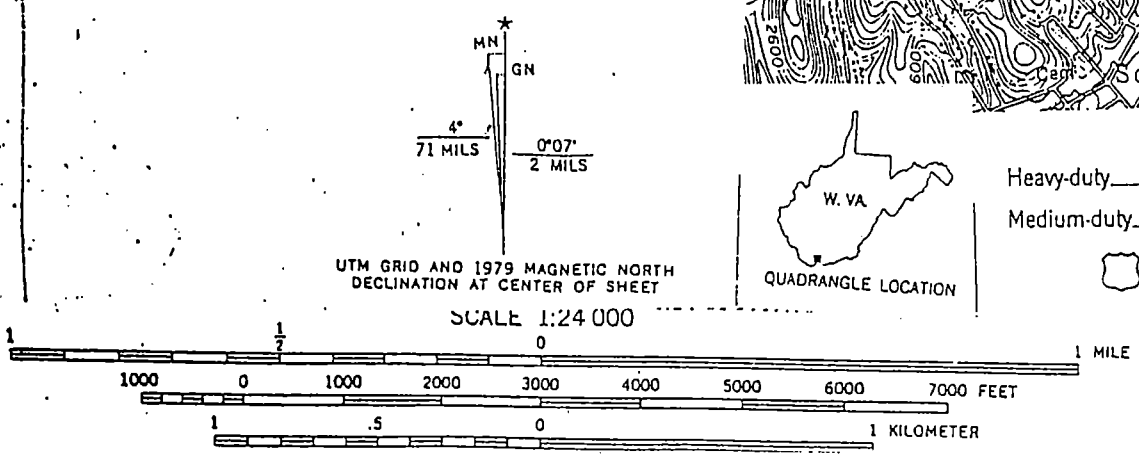
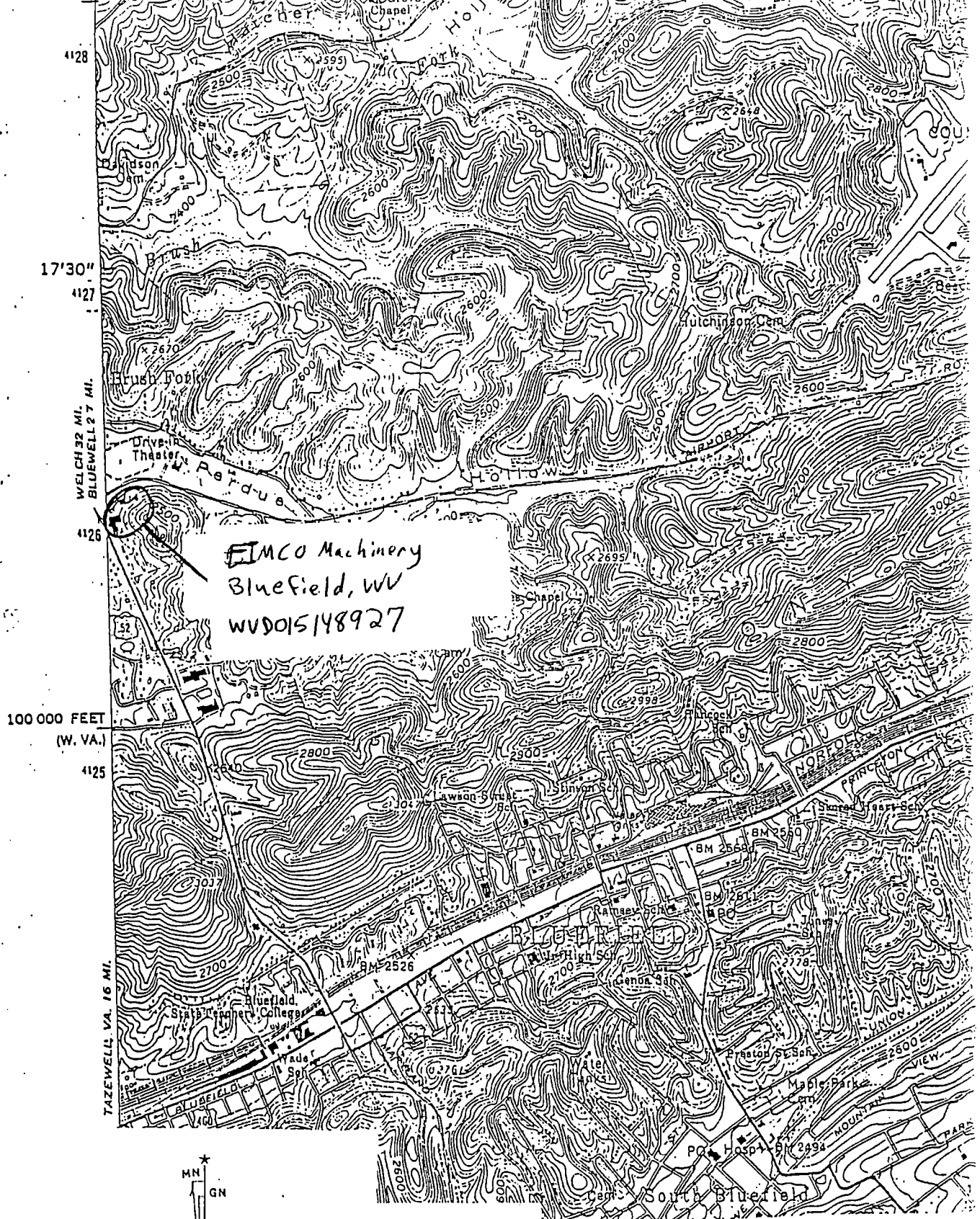
X VIOLATIONS

INSPECTORS: (1) P. L. Brown  
(2)  
(3),

NO VIOLATIONS

DATE PREPARED: 4-5-91

PREPARED BY: P. L. Brown



- ROAD CLASSIFICATION**
- |             |                 |
|-------------|-----------------|
| Heavy-duty  | Light-duty      |
| Medium-duty | Unimproved dirt |
- U. S. Route     
 State Route     
 Interstate Route

**BLUEFIELD, W. VA. — V**  
 SW/4 BLUEFIELD 15' QUADRANGLE  
 N3715—W8107.5/7.5

## INSPECTION REPORT

On April 4, 1991, this inspector conducted a Compliance Evaluation Inspection of EIMCO Mining Machinery, Incorporated in Bluefield, WV. Upon my arrival I was met by Joseph Cettin, general manager, and David Pyles, manufacturing services manager, who had not been previously advised of my intentions to inspect the facility. The representatives were informed that this inspection would emphasize the company's compliance with the Hazardous Waste Management Act (Chapter 20, Article 5E) and the regulations promulgated thereunder. Cliff Lively, emergency coordinator and RCRA contact was not present during this inspection.

This mining machinery manufacturer generates approximately 1,724 pounds per 6 weeks of D001 from parts cleaners serviced by Safety Kleen. Approximately 27 pounds per 8 weeks of F003/F005/D006/D007/D008 in the form of waste paint/thinner from a spray gun cleaner is also picked up by Safety Kleen for recycling. Non-hazardous water-based and oil-based waste coolants used in machinery are picked up by Safety Kleen as is waste oil. The facility generated hazardous waste D006/D007/D008 from steam jenny sludge in 1989. The waste was analyzed and disposed of by Safety Kleen. The pit holding this waste is cleaned out yearly. The waste from the steam jenny in 1990 was determined by lab analysis to be non-hazardous. It was sent to H.A.M. Sanitary Landfill in Peterstown, WV that year. The facility should continue to make a hazardous waste determination for the steam-jenny sludge whenever the pit is cleaned out.

The facility has three ovens: one used in stress-relieving heat treated machine parts that is currently in service, a burn out oven and a bake oven from the former rebuild which are no longer used. The facility should make a hazardous waste determination for any waste/ash when these ovens are cleaned out (area of concern).

The electric motor rebuild shop was closed out nine months ago. A degreasing tank in this area used Safety Kleen Solvent 105®, but has since been closed out. Epoxy/varnish tanks, one with varnish still in it, are located in the rebuild shop also. The facility should make a hazardous waste determination for the waste varnish when it is cleaned out (area of concern).

While the spray gun cleaner is serviced by Safety Kleen, the facility has a cascade waterfall in the paint room to catch overspray. The facility should make a hazardous waste determination for the overspray collected in the water trough when it is cleaned out (area of concern).

The facility has seven capacitors containing polychlorinated biphenyl still in service. The facility representatives said these will be changed out soon.

Manifests for Safety Kleen including service contract and Land Disposal Restriction Forms are on file up to the end of August 1990 (non-compliance 1). Beginning in September 1990 manifests have been sent to the Fairmont EIMCO office to be handled through the billing department. Mr. Cettin had the Fairmont office fax a Safety Kleen manifest to the Bluefield office during the inspection to verify that the manifests were kept in Fairmont and to check the service term for the parts cleaners. All manifests are on file there and the facsimiles were properly completed. The facility had not notified for generating F005/D006/D007/D008 (non-compliance 2).

The name and extension number of the emergency coordinator, Cliff Lively, was posted next to the switchboard at the front desk. The telephone number of the fire department was posted on a phone at the front desk. The facility did not have the locations of fire extinguishers and spill control material posted next to a telephone (non-compliance 3).

I concluded the inspection, thanked the representatives for their cooperation and assistance, then departed the facility.

The non-compliances cited above are being addressed through a Notice of Violation. This inspector will not recommend further enforcement action(s) if the violations are remediated within the stipulated time frame.

PB/pk



DIVISION OF NATURAL RESOURCES  
Waste Management Section

IV-190540-09

NOTICE OF VIOLATION

DATE: 4-4-91

TIME: 13:30

ISSUED TO: EIMCO Mining Machinery, Incorporated

EPA I.D.#: WVD015148927

FACILITY MAILING ADDRESS: P.O. Box 1100 Bluefield, WV 24701

FACILITY REPRESENTATIVE: Joseph Cettin, general manager

On the date and time specified, an authorized agent of the Chief of the Waste Management Section conducted an inspection of the facility described above in accordance with West Virginia Code, Chapter 20, Article 5E and/or an Order or Permit issued pursuant to §20-5E. During that inspection the following violation(s) were detected:

1. A. (Regulation) 47 CSR 35 Section 10.1.2  
B. (Facts) Facility does not have on file copies of manifests for hazardous waste sent off site since August 1990.
2. A. 47 CSR 35 Section 4.1.1  
B. Facility has not notified for generating hazardous wastes F005/D006/D007/D008.
3. A. 47 CSR 35 Section 10.1.3.d.2.B  
B. Facility did not have locations of fire extinguishers and spill control material posted by a telephone.
4. A. \_\_\_\_\_  
B. \_\_\_\_\_

In order to attain compliance with the cited Code and/or Regulations, you must perform the following remedial action(s):

The facility must comply with the above-cited Sections of the WV Hazardous Waste Management Regulations. In order to attain compliance, it is recommended that the facility:

- (1) Obtain copies of manifests from August 1990 to present and begin maintaining copies of hazardous waste manifests.
- (2) Submit a subsequent Notification of Hazardous Waste Activity to notify for F005/D006/D007/D008.
- (3) Post the required emergency information next to a telephone.
- (4) Document compliance by writing to the Chief, Waste Management Section, 1356 Hansford St., Charleston, WV 25301 and send a photocopy of that correspondence to this inspector.

A copy of this Notice of Violation will be forwarded to the Enforcement Office of the Waste Management Section. The issuance of this Notice may result in an administrative civil penalty being levied in accordance with West Virginia Code §20-5E-16(a).

Issued By: P.L. Brown

Title: Environmental Inspector



599

STATE OF WEST VIRGINIA  
DEPARTMENT OF COMMERCE, LABOR AND ENVIRONMENTAL RESOURCES  
WASTE MANAGEMENT SECTION

1356 Hansford Street  
Charleston, West Virginia 25301  
Telephone (304)348-5929

June 17, 1991

GASTON CAPERTON  
Governor

J. EDWARD HAMRICK III  
Director

ANN A. SPANER  
Deputy Director

Joseph Cettin, General Manager  
EIMCO Mining Machinery, Inc.  
P.O. Box 1100  
Bluefield, West Virginia 24701

Dear Mr. Cettin:

Enclosed is a copy of the **Compliance Schedule Evaluation (CSE) Report** completed on your facility by a representative of the Chief of the Waste Management Section. This report is based on the inspection conducted on June 4, 1991.

There were no areas of non-compliance with the appropriate Hazardous Waste Management Regulations documented during this inspection.

Thank you for your assistance and cooperation during this inspection. If you have any questions concerning the inspection or attached report, please feel free to contact this office at (304) 348-5989.

Sincerely,

A handwritten signature in dark ink, appearing to read "H. Michael Dorsey".

H. Michael Dorsey, Assistant Chief  
Compliance Monitoring/Enforcement

HMD/kw

Enclosure

cc: Janemarie Newton, U.S. EPA, Region III  
P. L. Brown, Inspector  
File



# EVALUATION - VIOLATION - ENFORCEMENT FORM

## HANDLER

ID Number W V D 0 1 5 1 4 8 9 2 7

Date Submitted 0 6 0 6 9 1

Handler Name

EIMCO Mining Machinery, Incorporated

Street

US Route 52 N

City

Bluefield, WV

## EVALUATION

Add ☒ Change ☐ Delete ☐

Date	Number	Agency	Type	Reason	Branch	Person
0 6 0 4 9 1		S	C S E		C M	P L B

Areas of Evaluation ( E - Evaluated, NE - Not Evaluated, NA - Not Applicable )

GGR		GSO	E	TMD		DNR		DTR		DIM		DOR	
GHR		GOR		TOR		DGW		DSI		DTT			
GPT		GLB	E	DGS		DCL		DWP		DCM		CAS	
GRR		TGR		DPP		DFR		DLT		DPS		FEA	
GSC		THR		DCP		DNC		DLF		DLB			

Comments

## VIOLATION

Add ☐ Change ☒ Delete ☐

Agency	Number	Area	Class	Regulation Type	Regulation Citation
S		G S Q	2	S R	10.1.2

Date Determined

Priority

Branch

Person

Returned to Compliance  
Scheduled Actual

0 4 0 4 9 1

C M

P L B

0 5 0 6 9 1

0 6 0 4 9 1

Comments

Generator not keeping copies of manifests since 9/90

## VIOLATION

Add ☐ Change ☒ Delete ☐

Agency	Number	Area	Class	Regulation Type	Regulation Citation
S		G S Q	2	S R	4.1.1

Date Determined

Priority

Branch

Person

Returned to Compliance  
Scheduled Actual

0 4 0 4 9 1

C M

P L B

0 5 0 6 9 1

0 6 0 4 9 1

Comments

Facility has not notified for generating F005/D006/D007/D008

## VIOLATION

Add ☐ Change ☒ Delete ☐

Agency	Number	Area	Class	Regulation Type	Regulation Citation
S		G S Q	2	S R	10.1.3.d.2.B

Date Determined

Priority

Branch

Person

Returned to Compliance  
Scheduled Actual

0 4 0 4 9 1

C M

P L B

0 5 0 6 9 1

0 6 0 4 9 1

Comments

Locations of fire extinguishers &amp; spill control material not posted by a phone

## VIOLATION

Add ☐ Change ☐ Delete ☐

Agency	Number	Area	Class	Regulation Type	Regulation Citation

Date Determined

Priority

Branch

Person

Returned to Compliance  
Scheduled Actual

Comments

INSPECTION FACT SHEET

COMPANY NAME: EIMCO Mining Machinery, Inc. I.D. #: WVD015148927

MAILING ADDRESS: P.O. Box 1100  
Bluefield, WV 24701

TYPE OF FACILITY: SQG

LOCATION: US Route 52 North  
Bluefield, WV

COUNTY: Mercer (055)

COMPANY CONTACT: Joseph Cettin, gen. manager  
Cliff Lively, emergency coordinator  
& RCRA contact

HANDLING CODES:

PHONE: (304) 327-6623

PURPOSE: Compliance Schedule Evaluation (CSE)

APPLICABLE REGULATIONS: West Virginia Hazardous Waste Management Act,  
Chapter 20-5E and 40 CFR, Part 260-265

LIST OF CHEMICALS:

(For Small Quantity Generators, list amount of waste, how it is handled; where it goes)  
F003/F005/D006/D007/D008 - waste paint/thinner - 27 lbs/8 weeks - Safety Kleen  
D001 - parts cleaner waste - 1724 lbs/6 weeks - Safety Kleen  
Water-based coolant (non-hazardous) - Safety Kleen  
Oil-based coolant (non-hazardous) - Safety Kleen  
Waste oil - Safety Kleen

DATE INSPECTED: 6-4-91

VIOLATIONS

INSPECTORS: (1) P. L. Brown  
(2)  
(3)

X NO VIOLATIONS

DATE PREPARED: 6-5-91

PREPARED BY: P. L. Brown

## INSPECTION REPORT

On June 4, 1991, this inspector conducted a Compliance Schedule (Follow-up) Evaluation of EIMCO Mining Machinery, Inc. Upon my arrival I was met by Joe Cettin, general manager, who had been previously advised of my intentions to inspect the facility. The representative was informed that this inspection would emphasize the company's compliance with the Hazardous Waste Management Act (Chapter 20, Article 5E) and the regulations promulgated thereunder.

This inspection was to assess the compliance with Sections 10.1.2, 4.1, and 10.1.3.d.2.B of the WV Hazardous Waste Management Regulations. During the original Compliance Evaluation Inspection on April 4, 1991 it was noted that the facility did not have all manifests on file since 9/90, the facility had not notified of their hazardous waste activity involving generation of F005/D006/D007/D008, and the locations of fire extinguishers and spill control material was not posted by a phone.

A Notice of Violation (NOV) was issued to the facility on April 5, 1991 by certified mail and received on April 6, 1991. This NOV listed the violations/citations of the applicable Regulations and specifically listed the items which needed completed in order to achieve compliance.

During the follow-up inspection I noted that back copies of manifests have been obtained and are on file, a subsequent Notification of Regulated Waste Activity was completed and given to me, and the locations of fire extinguishers, spill control material, emergency coordinator's name and phone number and phone numbers of fire and police departments are posted by several telephones throughout the facility.

I concluded the inspection, thanked the representative for his cooperation and assistance, then departed the facility.

The subsequent Notification of Regulated Waste Activity is included with this report.

PB/pk

Please print or type with ELITE type (12 characters per inch) in the unshaded areas only

<p>Please refer to the instructions for Filing Notification before completing this form. The information requested here is required by law (Section 3010 of the Resource Conservation and Recovery Act).</p>		<h2 style="margin: 0;">Notification of Regulated Waste Activity</h2> <p>United States Environmental Protection Agency</p>		<p>Date Received (For Official Use Only)</p>																			
<p><b>I. Installation's EPA ID Number (Mark 'X' in the appropriate box)</b></p> <table style="width:100%;"> <tr> <td style="width:33%;"><input type="checkbox"/> A. First Notification</td> <td style="width:33%;"><input checked="" type="checkbox"/> B. Subsequent Notification (complete item C)</td> <td style="width:34%;">C. Installation's EPA ID Number</td> </tr> <tr> <td></td> <td></td> <td style="text-align: center;">WVDC15148927</td> </tr> </table>						<input type="checkbox"/> A. First Notification	<input checked="" type="checkbox"/> B. Subsequent Notification (complete item C)	C. Installation's EPA ID Number			WVDC15148927												
<input type="checkbox"/> A. First Notification	<input checked="" type="checkbox"/> B. Subsequent Notification (complete item C)	C. Installation's EPA ID Number																					
		WVDC15148927																					
<p><b>II. Name of Installation (Include company and specific site name)</b></p> <p style="font-size: 1.2em; letter-spacing: 0.5em;">EIMCO MINING MACHINERY INC</p>																							
<p><b>III. Location of Installation (Physical address not P.O. Box or Route Number)</b></p> <p>Street</p> <p style="font-size: 1.2em; letter-spacing: 0.5em;">HWY 52 N</p> <p>Street (continued)</p> <p>City or Town</p> <p style="font-size: 1.2em; letter-spacing: 0.5em;">BLUEFIELD</p> <p>State</p> <p style="font-size: 1.2em; letter-spacing: 0.5em;">WV</p> <p>ZIP Code</p> <p style="font-size: 1.2em; letter-spacing: 0.5em;">24701-</p> <p>County Code</p> <p style="font-size: 1.2em; letter-spacing: 0.5em;">01</p> <p>County Name</p> <p style="font-size: 1.2em; letter-spacing: 0.5em;">MERCER</p>																							
<p><b>IV. Installation Mailing Address (See Instructions)</b></p> <p>Street or P.O. Box</p> <p style="font-size: 1.2em; letter-spacing: 0.5em;">PO BOX 1100</p> <p>City or Town</p> <p style="font-size: 1.2em; letter-spacing: 0.5em;">BLUEFIELD</p> <p>State</p> <p style="font-size: 1.2em; letter-spacing: 0.5em;">WV</p> <p>ZIP Code</p> <p style="font-size: 1.2em; letter-spacing: 0.5em;">24701-</p>																							
<p><b>V. Installation Contact (Person to be contacted regarding waste activities at site)</b></p> <table style="width:100%;"> <tr> <td style="width:50%;">Name (last)</td> <td style="width:50%;">(first)</td> </tr> <tr> <td style="font-size: 1.2em; letter-spacing: 0.5em;">LIVELY</td> <td style="font-size: 1.2em; letter-spacing: 0.5em;">CLIFFORD</td> </tr> <tr> <td>Job Title</td> <td>Phone Number (area code and number)</td> </tr> <tr> <td style="font-size: 1.2em; letter-spacing: 0.5em;">H.R. MANAGER</td> <td style="font-size: 1.2em; letter-spacing: 0.5em;">304-325-0481</td> </tr> </table>						Name (last)	(first)	LIVELY	CLIFFORD	Job Title	Phone Number (area code and number)	H.R. MANAGER	304-325-0481										
Name (last)	(first)																						
LIVELY	CLIFFORD																						
Job Title	Phone Number (area code and number)																						
H.R. MANAGER	304-325-0481																						
<p><b>VI. Installation Contact Address (See Instructions)</b></p> <table style="width:100%;"> <tr> <td style="width:20%;">A. Contact Address Location</td> <td style="width:20%;">Mailing</td> <td style="width:60%;">B. Street or P.O. Box</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input checked="" type="checkbox"/></td> <td style="font-size: 1.2em; letter-spacing: 0.5em;">PO BOX 1100</td> </tr> <tr> <td colspan="2">City or Town</td> <td>State</td> </tr> <tr> <td colspan="2" style="font-size: 1.2em; letter-spacing: 0.5em;">BLUEFIELD</td> <td style="font-size: 1.2em; letter-spacing: 0.5em;">WV</td> </tr> <tr> <td colspan="2">ZIP Code</td> <td></td> </tr> <tr> <td colspan="2" style="font-size: 1.2em; letter-spacing: 0.5em;">24701-</td> <td></td> </tr> </table>						A. Contact Address Location	Mailing	B. Street or P.O. Box	<input type="checkbox"/>	<input checked="" type="checkbox"/>	PO BOX 1100	City or Town		State	BLUEFIELD		WV	ZIP Code			24701-		
A. Contact Address Location	Mailing	B. Street or P.O. Box																					
<input type="checkbox"/>	<input checked="" type="checkbox"/>	PO BOX 1100																					
City or Town		State																					
BLUEFIELD		WV																					
ZIP Code																							
24701-																							
<p><b>VII. Ownership (See Instructions)</b></p> <p>A. Name of Installation's Legal Owner</p> <p style="font-size: 1.2em; letter-spacing: 0.5em;">EIMCO MINING MACHINERY INC</p> <p>Street, P.O. Box, or Route Number</p> <p style="font-size: 1.2em; letter-spacing: 0.5em;">PO BOX 1100</p> <p>City or Town</p> <p style="font-size: 1.2em; letter-spacing: 0.5em;">BLUEFIELD</p> <p>State</p> <p style="font-size: 1.2em; letter-spacing: 0.5em;">WV</p> <p>ZIP Code</p> <p style="font-size: 1.2em; letter-spacing: 0.5em;">24701-</p> <table style="width:100%; margin-top: 10px;"> <tr> <td style="width:30%;">Phone Number (area code and number)</td> <td style="width:10%;">B. Land Type</td> <td style="width:10%;">C. Owner Type</td> <td style="width:10%;">D. Change of Owner Indicator</td> <td style="width:10%;">(Date Changed)</td> <td style="width:10%;">Month</td> <td style="width:10%;">Day</td> <td style="width:10%;">Year</td> </tr> <tr> <td style="font-size: 1.2em; letter-spacing: 0.5em;">304-325-0481</td> <td style="text-align: center;">P</td> <td style="text-align: center;">P</td> <td style="text-align: center;">Yes <input type="checkbox"/> No <input checked="" type="checkbox"/></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>						Phone Number (area code and number)	B. Land Type	C. Owner Type	D. Change of Owner Indicator	(Date Changed)	Month	Day	Year	304-325-0481	P	P	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>						
Phone Number (area code and number)	B. Land Type	C. Owner Type	D. Change of Owner Indicator	(Date Changed)	Month	Day	Year																
304-325-0481	P	P	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>																				



## ID - For Official Use Only

## VIII. Type of Regulated Waste Activity (Mark 'X' in the appropriate boxes. Refer to Instructions.)

## A. Hazardous Waste Activity

1. Generator (See Instructions)
- ☐ a. Greater than 1000kg/mo (2,200 lbs.)
- ☒ b. 100 to 1000 kg/mo (220 - 2,200 lbs.)
- ☐ c. Less than 100 kg/mo (220 lbs.)
2. Transporter (Indicate Mode in boxes 1-5 below)
- ☐ a. For own waste only
- ☐ b. For commercial purposes
- Mode of Transportation
- ☐ 1. Air
- ☐ 2. Rail
- ☐ 3. Highway
- ☐ 4. Water
- ☐ 5. Other - specify \_\_\_\_\_
3. Treater, Storer, Disposer (at installation)
- Note: A permit is required for this activity; see instructions.
- Hazardous Waste Fuel
- ☐ a. Generator Marketing to Burner
- ☐ b. Other Marketers
- ☐ c. Burner - Indicate device(s)
- Type of Combustion Device
- ☐ 1. Utility Boiler
- ☐ 2. Industrial Boiler
- ☐ 3. Industrial Furnace
- ☐ 5. Underground Injection Control

## B. Used Oil Fuel Activities

1. Off-Specification Used Oil Fuel
- ☐ a. Generator Marketing to Burner
- ☐ b. Other Marketer
- ☐ c. Burner - Indicate device(s)
- Type of Combustion Device
- ☐ 1. Utility Boiler
- ☐ 2. Industrial Boiler
- ☐ 3. Industrial Furnace
2. Specification Used Oil Fuel Marketer (or On-site Burner) Who First Claims the Oil Meets the Specification

## IX. Description of Regulated Wastes (Use additional sheets if necessary)

A. Characteristics of Nonlisted Hazardous Wastes. Mark 'X' in the boxes corresponding to the characteristics of nonlisted hazardous wastes your installation handles. (See 40 CFR Parts 261.20 - 261.24)

1. Ignitable (D001) ☒ 2. Corrosive (D002) ☐ 3. Reactive (D003) ☐ 4. EP Toxic (D000) ☒ (List specific EPA hazardous waste number(s) for the EP Toxic contaminant(s))

D006 D007 D008

B. Listed Hazardous Wastes. (See 40 CFR 261.31 - 33. See instructions if you need to list more than 12 waste codes.)

1 FC03	2 FC05	3	4	5	6
7	8	9	10	11	12

C. Other Wastes. (State or other wastes requiring an I.D. number. See instructions.)

1	2	3	4	5	6
---	---	---	---	---	---

## X. Certification

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment.

Signature

Name and Official Title (type or print)

Clifford H. Lively Jr. H.R. Manager

Date Signed

5-29-91

## XI. Comments

Note: Mail completed form to the appropriate EPA Regional or State Office. (See Section III of the booklet for addresses.)